

Professional Licensing Agency
402 West Washington Street
Room W072
Indianapolis, IN 46204



Michael R. Pence
Governor of Indiana
Deborah J. Frye
PLA Executive Director

Expired Hearing Aid Dealer Renewal

Your hearing aid dealer license in the state of Indiana is expired! Renew online at www.pla.in.gov or send this form with the renewal fee of \$90 (\$40 Renewal Fee + \$50 Late Fee) to the address above, allowing 4 weeks for processing. Make check or money order payable to 'Indiana Professional Licensing Agency'. If you answer 'Yes' to any question below, send a detailed statement regarding the response with your renewal form. **If your license has been expired for more than 2 years you must submit copies of your CEU's with the renewal form.**

LICENSEE INFORMATION: Update address, if needed, and provide a current phone number and email address			
Licensee Name	License Number	Expiration Date	Renewal Fee \$90.00
Street Address			
City	State	Zip Code	
Phone Number	Email Address		
QUESTIONS			
1. Since you last renewed, has any health profession license, certificate, registration, or permit you hold or have held been disciplined or are formal charges pending in any state?			YES NO
2. Since you last renewed, have you been denied a license, certificate, registration, or permit in any state?			YES NO
3. Since you last renewed, and except for minor violations of traffic laws resulting in fines and arrests or convictions that have been expunged by a court, have you been arrested, entered into a diversion agreement, been convicted of, pled guilty to, or pled nolo contendere to any offense, misdemeanor, or felony in any state?			YES NO
4. Since you last renewed, have you had a malpractice judgment against you or settled a malpractice action?			YES NO
LICENSEE AFFIRMATION			
I hereby swear or affirm under the penalties of perjury that I understand and have met the continuing education requirements for renewal, understand the Committee of Hearing Aid Examiners statutes and rules and have answered the questions true to the best of my knowledge.			
Signature of Licensee		Date (month, day, year)	

Visit us on the web at www.pla.in.gov. If you have any questions for the Committee of Hearing Aid Dealer Examiners please email pla4@pla.in.gov or call 317-234-2067.

FOR OFFICE USE ONLY		
Renewal Fee	Receipt No.	Date